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| Contract | # |
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7.

STATE OF UTAH CONTRACT

| | Department Name: Environmental Qualit | | | agency of the State of Utah:, referred to as (STATE | | | |
|----|--|-------------------------------|----------------------------|---|--|--|--|
| | and the following CONTRACTOR: | | | | | | |
| | Davis County Health Department | | LEGAL STATUS OF CONTRACTOR | | | | |
| | 22 State Street | ame | | Sole Proprietor Non-Profit Corporation | | | |
| | | dress | \1.e | For-Profi Cor oration | | | |
| | Clearfield | Utah 840 State Zip | 015 | Partnership Government Agency | | | |
| | City | Since Zip | ' | <u> </u> | | | |
| | Contact Person <u>Lewis Garrett</u> Pho Vendor # <u>17814E</u> Commodity Code # <u>925</u> | | lewisg@daviscountyutah | i.gov | | | |
| 2. | GENERAL PURPOSE OF CONTRACT: Environmental Services as described in a | | is contract is to provide: | | | | |
| 3. | PROCUREMENT: This contract is entered into as a result of the procurement process on RX# <u>NA</u> , FY, Bid# <u>N/A</u> or a <u>pre-approved</u> sole source authorization (from the Division of Purchasing) # SS <u>N/A</u> . | | | | | | |
| 4. | CONTRACT PERIOD: Effective Date: <u>July 1, 2013</u> Termination Date: <u>June 30, 2014</u> unless terminated early or extended in accordance with the terms and conditions of this contract. Renewal options (if any): <u>N/A</u> . All payments under this contract will be completed within 90 days after the Termination Date. | | | | | | |
| 5. | CONTRACT COSTS: CONTRACTOR will be paid a maximum of \$66,645 for costs authorized by this contract. Additional information regarding costs: Payments will be made in quarterly installments on August 1, November 1, February 1, and May 1 of the applicable fiscal year. | | | | | | |
| 6. | ATTACHMENT A: Division of Purchasin ATTACHMENT B: Service Delivery Pla ATTACHMENT C: Digital Signature Cla ATTACHMENT D: N/A Any conflicts between Attachment A and | n ause | | Attachment A. | | | |
| 7. | DOCUMENTS INCORPORATED INTO THIS CONTRACT BY REFERENCE BUT NOT ATTACHED: a. All other governmental laws, regulations, or actions applicable to the goods and/or services authorized by this contract. b. Utah State Procurement Code, Procurement Rules, and CONTRACTOR'S response to Bid #N/A dated | | | | | | |
| | IN WITNESS WHEREOF, the parties sig | gn and cause this contract to | o be executed. STATE | man 6/13/201 | | | |
| - | Contractor's signature Lewis Garrett, Director of B | Date Health | Agency's signature | Date | | | |
| - | Type or Print Name and Title | | Director, Division of P | ND urchasing Date | | | |
| | · · · · · · · · · · · · · · · · · · · | | TO ARROW OF FINANCE | - | | | |
| | | | Director, Division of F | | | | |
| | | | | | | | |
| | Renette Anderson | 801-536-4478 | 801-536-4441 | renetteanderson@utah.gov | | | |
| | Agency Contact Person | Telephone Number | Fax Number | Email (Revision 3/17 | | | |